

**Professional Licensing Agency**  
402 West Washington Street  
Room W072  
Indianapolis, IN 46204



**Michael R. Pence**  
*Governor of Indiana*  
**Deborah J. Frye**  
*PLA Executive Director*

## Behavioral Health and Human Services CE Sponsor Renewal Form

Your Behavioral Health and Human Services CE Sponsor license in the state of Indiana expires on April 1, 2016. To renew, please complete this document in its entirety and submit it with the renewal fee of \$50.00 to the office address shown above. Make check or money order payable to 'Indiana Professional Licensing Agency'. If this document is postmarked after April 1, 2016 you must include a \$50 late fee.

LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address			
Enter Licensee Name	Enter License Number	Expiration Date	Renewal Fee
Street Address			
City	State	Zip Code	
Phone Number	Email Address		

PROGRAM INFORMATION		
List program title(s), program date(s) and number of CE hours granted for each program conducted since last renewal.		
Program Title	Date	CE Hours
1)		
2)		
3)		
4)		
5)		
6)		
7)		

LICENSEE AFFIRMATION	
By signing below, I hereby attest that the information listed on this renewal application is true, complete and correct.	
Signature of Officer of Corporation	Date (month, day, year)

Please submit a letter with the completed renewal form and fee if any of the following have occurred since your organization was granted approval, or since your last renewal:

- The name of the organization has changed (include date of name change).
- The name of the contact person within the organization has changed.
- If your organization has been approved to provide continuing education by any other state licensing boards or any national organizations (include date of approval).

Visit [www.pla.in.gov](http://www.pla.in.gov) for additional information regarding your license.

If you have any questions for the Behavioral Health and Human Services Licensing Board please email [pla8@pla.in.gov](mailto:pla8@pla.in.gov) or call 317-234-2054.

FOR OFFICE USE ONLY		
Renewal Fee	Receipt No.	Date